

**BY ORDER OF THE COMMANDER
GRAND FORKS AIR FORCE BASE**

**GRAND FORKS AIR FORCE BASE
INSTRUCTION 48-102**



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Aerospace Medicine

OCCUPATIONAL HEALTH PROGRAM

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction establishes responsibilities and procedures for conducting the Air Force Occupational Health Program at Grand Forks Air Force Base. It applies to all units, assigned, attached, or tenant to this installation where military or civilian personnel are exposed to potential occupational health hazards. Ensure that all records created as a result of processes prescribed in this publication are maintained In Accordance With (IAW) Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed of IAW with the Air Force Records Information Management System (AFRIMS) located at <https://www.my.af.mil/gcss-af61a/afrims/afrims/>. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF Form 847, *Recommendation for Change of Publication*; route AF Form 847s from the field through the appropriate functional's chain of command.

SUMMARY OF CHANGES

This document has been substantially revised and must be completely reviewed.

1. General. Public Health (PH), Bioenvironmental Engineering (BE), Flight Medicine, Civilian Personnel Office (CPO), Unit and Organizational Commanders and supervisors work in a coordinated effort to make sure individuals' work environments are as safe as possible and to provide early identification of evidence indicating possible hazards or ill effects of exposure to hazardous work environments.

2. Procedures and Responsibilities.

2.1. The Installation Commander will provide a safe and healthful work center for all Air Force military and civilian workers.

2.2. 319th Medical Group will:

2.2.1. Provide early detection of pregnancy through testing (ideally before the second missed menstrual cycle) for active duty women whose jobs involve exposure to potentially hazardous chemicals or physical agents. Provide medical officer consultation with private physicians caring for pregnant civilian employees.

2.2.2. Provide technical assistance or consultation (through PH and BE) to units developing occupational health training programs.

2.2.3. Determine, through the Occupational and Environmental Health Working Group (OEHWG), what occupational health examinations are required for personnel working in each worksite where the potential for health hazards exists.

2.2.4. Provide medical treatment of military and civilian employees with occupational health injuries and illnesses as permitted by law.

2.3. BE will:

2.3.1. Conducts Occupational and Environmental Health (OEH) risk assessments and assigns workplace categories IAW AFI 48-101, *Occupational and Environmental Health Program*.

2.3.2. Executes all BE-related tasks required to complete an Occupational & Environmental Health Site Assessments (OEHSAs). All OEH risks identified will be incorporated on the AF Form 55, SEG Occupational and Environmental Health Exposure Data (OEHD) Summary.

2.3.3. Provide a schedule of routine health risk assessments (HRAs) due the next calendar year to the OEHWG by 1 Nov of each year.

2.3.4. Provides a copy of the routine HRA letter, OEHD and personnel roster to PH upon completion. OEHDs will be reviewed at least one week in advance to the scheduled OEHWG to ensure correct data.

2.3.5. Work with CPO when requested to review each case that has environmental differential pay (EDP). Evaluate the worksites and send results of findings to CPO to help them judge if an EDP is valid.

2.3.6. Evaluate and make recommendations on work area procedures when adverse health trends or occupational illnesses are identified.

2.4. Flight Medicine will:

2.4.1. Schedule and perform occupational health examinations as required for those working in a Category 1 work center.

2.4.2. Schedule military newcomers requiring pre-placement examinations.

2.4.3. Forward notification of worker's exam clearance letter to individuals who have received an occupational health examination, to their supervisors and to PH.

2.4.4. Provide pregnant active duty members and their supervisors an AF Form 469, *Duty Limiting Condition Report*, detailing duty restrictions.

2.4.5. Provide results of an occupational health examination at time of PCM visit.

2.5. PH will:

2.5.1. Be responsible for maintaining and updating military and civilian occupational health examination data in the Preventative Health Assessment Individual Medical Readiness/Aeromedical Services Information Management System database.

2.5.2. At least annually, provide notification to organizations indicating what workplaces have individuals requiring occupational health examinations.

2.5.3. Act as a resource for occupational health educational material for supervisors and assist them in developing training programs when requested. Provide guidance related to occupational health training when conducting shop visits with BE.

2.5.4. Identify occupational exams needed by the member and provide Flight Medicine with a roster. Verify the accuracy of occupational health examination using AF Form 2766 as a guide before forwarding them to Flight Medicine.

2.5.5. Provide hearing tests to personnel performing duties in designated hazardous noise areas. These audiograms are pre-placement (reference), annual and on termination of service or employment. When necessary, additional detailed follow-up audiograms are required to further evaluate a worker's hearing.

2.5.5.1. Provide health education and fitting for ear plugs IAW AFOSH STD 48-20, *Occupational Noise and Hearing Conservation Program*, to all individuals identified as working in hazardous areas.

2.5.6. Provide pregnant civilians, their supervisors and CPO with a written description of potential health hazards in the duty restrictions. Temporary relocation and absence are the responsibility of the supervisor and CPO.

2.5.7. Track health trends in work areas and report adverse trends and occupational illnesses to OEHWG. Assist BE in occupational injury/illness investigations as needed.

2.5.8. Provide unit or organizational commanders with the names of those who fail to show for scheduled appointments.

2.6. Commanders and/or Functional Managers will ensure that all work centers have conducted and properly documented hazard assessments to determine if hazards are present and take appropriate actions necessary to protect workers from injury, illness, or death.

2.7. Supervisors will:

2.7.1. Ensure required OEH hazard controls are implemented and functioning correctly, and personal protective equipment (PPE) is available and used correctly in the workplace. PPE will be provided, used, and maintained in a sanitary serviceable condition IAW BE OEH Risk Assessment reports.

2.7.2. Ensure workplace complies with applicable OEH regulatory and policy requirements as outlined in BE OEH Risk Assessment reports.

2.7.3. Supply job descriptions of pregnant workers to PH/BE when requested. Include a task list of each woman's specific duties, physical requirements and known or suspected hazardous chemical exposures related to her duties.

2.7.4. Make sure duty restrictions imposed on workers due to the results of occupational health examination or pregnancy are followed. Consult with PH if the restriction cannot be followed or duties are otherwise appreciably changed.

2.7.5. Inform BE of any operation suspected of being potentially hazardous and when existing potentially hazardous operations are moved or appreciably changed.

2.7.6. Ensure personnel attend scheduled examinations (see 2.9 and 2.10 below).

2.7.7. Refer all military personnel with occupational illnesses and injuries to Flight Medicine for medical evaluation and care. Encourage civilians to do likewise. Assist PH/BE and other Medical Group agencies in investigating occupational injuries and illnesses.

2.7.8. Prepare the job task list and forward it to PH within three working days of notification of pregnancy by a civilian employee.

2.7.9. Ensures an updated personnel roster is provided to BE and Public Health once every six months IAW AFI 48-145, *Air Force Occupational Health Program*

2.8. CPO will:

2.8.1. Ensure all workers employed in potentially hazardous workplaces receive pre-placement occupational examinations before beginning work. The individuals requiring pre-placement examinations are assigned to workplaces identified by PH/BE. The individual's SF 78, Certification of Medical Examination, is annotated with the name of gaining organization, work center, Occupational Structure Code and annotation that pre-placement occupational health examination is required, before being sent to Flight Medicine.

2.8.2. Provide monthly master civilian personnel rosters to PH used in verifying their database.

2.8.3. Give outprocessing checklists to civilian employees who work in hazardous areas or perform hazardous duties when they initiate termination or retirement procedures. Check to make certain they have processed through PH. Provide a monthly list to PH of those on the occupational health examination program who have terminated employment.

2.9. Annual occupational health examinations are scheduled in the following manner:

2.9.1. Each industrial shop that requires a special medical exam (determined by OEHWG) will have all personnel contact Flight Medicine for an appointment.

2.9.2. Shop supervisors will track compliance with occupational health appointments and reschedule missed appointments through Flight Medicine.

2.9.3. Flight Medicine will schedule occupational health examinations and follow-up procedures, if required, with the individual.

2.9.4. PH will maintain a record of occupational health compliance and send no-show notices to commanders on the same day individuals fail to show for scheduled appointment.

2.9.5. Flight Medicine will track no-shows at the end of the day. Flight Medicine will contact member's supervisor (after multiple attempts, they may contact the First Sergeant) informing them of the missed appointment and will reschedule the member.

2.10. Newcomers' occupational health examinations are scheduled in the following manner:

2.10.1. Military newcomers who require pre-placement examinations are identified by PH. Newcomers will be given a pre-placement exam either the day they process through or scheduled for a later date. Some individuals may not require a pre-placement examination, such as, an individual who received annual audiometric testing, hearing conservation training and fit-testing before departing their last base. Newcomers will receive examinations as early as possible, but no later than 30 days after inprocessing to establish baseline data before significant exposed to potentially hazardous duties.

2.10.2. Civilian newcomers are identified to Flight Medicine via the SF 78 forwarded from the CPO as described in 2.8.1. above. Flight Medicine will perform the required examinations. PH provides occupational health education, fits and issues ear plugs..

TIMOTHY E. BUSH, Colonel, USAF
Commander, 319 ABW

Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

29 CFR, *Labor*, Jul 07.

AFI 44-102, *Medical Care Management*, May 07.

AFI 48-101, *Aerospace Medical Operations*, Aug 05.

AFI 48-145, *Occupational and Environmental Health Program*, Mar 08.

AFOSH STANDARD 48-137, *Respiratory Protection Program*, Feb 05.

AFOSH STANDARD 48-20, *Occupational Noise and Hearing Conservation Program*, Apr 10.

AFOSH STANDARD, 91-501, *Air Force consolidated Occupational Safety Standard*, Jul 04.

Prescribed and Adopted Forms

Prescribed Forms: There are no forms prescribed by this publication.

Adopted Forms: AF Form 847, *Recommendation for Change of Publication*.

Abbreviations and Acronyms

BE—Bioenvironmental Engineering

CPO—Civilian Personnel Office

EDP—Environmental Differential Pay

OEH—Occupational and Environmental Health

OEHWG—Occupational and Environmental Health Working Group

PCA—Permanent Change of Assignment

PCS—Permanent Change of Station

PH—Public Health

Terms

Category 1 Work Center— These work centers are categorized with having the following requirements:

- Hazards poorly defined or poorly controlled; work environment or processes unstable
- Inherent occupational/environmental risk present with medium to high hazard potential
- Regulatory assessment requirements, e.g., asbestos (29 CFR 1910.1001)
- Requirement for special purpose occupational exams, other than audiograms
- Potential for significant occupational/environmental regulatory non-compliance

Pre-Exposure Examinations—Specific examinations given before employment in potentially hazardous areas to document baseline data for use in future medical evaluations or to assess the

individual's fitness for specific jobs. Individuals receiving examinations in this category include newly hired civilians, military personnel arriving Permanent Change of Station (PCS) and military and civilians who Permanent Change of Assignment (PCA) to a hazardous situation.

Pre-Placement (Reference) Audiogram—These are required at the time of first exposure to noise hazard duty. They are accomplished within 30 days of assignment. Those scheduled for reference audiograms must be removed from hazardous duties for a period of at least 14 hours before the testing to get a true evaluation of their hearing abilities.

Pregnant Workers' Occupational Evaluation— Interviews are performed by PH to help determine the possible effects of workplace exposures on the fetus and the pregnant woman. Duty restriction recommendations are based on information provided by the woman, her supervisor and through consultation with the BE workplace exposure assessment and the hospital professional staff.

Special Purpose Occupational Health Examinations— These are conducted at intervals (pre-placement and periodic) to evaluate and document possible effects of occupational exposures other than noise. They are tailored to the occupational hazards identified by BE surveillance. Special purpose examinations may include medical histories, physical examinations and clinical and biological tests.

Termination Occupational Health Examinations—Special purpose and audiometric examinations are done upon end of employment or retirement; however, some may also be required before PCS or PCA. Termination examinations result document worker health when leaving a potentially hazardous work environment. Such information is essential in establishing equitable compensation should a claim be filed.